

Errata Sheet

Errata Sheet Release Date: August 2006

Please note that since the implementation of this publication, the following corrections or changes have been identified:

Facilitator's Guide Medicare Physician Guide: A Resource for Residents, Practicing Physicians, and Other Health Care Professionals 3-Hour Medicare Program Training Module			
Page Number	Section Title and/or Number	Description of Change	
21	Chapter 1	Delete the second sentence of the last paragraph and add the following:	
		Effective January 1, 2006 a financial limitation was placed on physical therapy, occupational therapy, and speech-language pathology services received by Medicare beneficiaries in all settings except the outpatient hospital and the hospital emergency room. CMS may grant, at the request of the individual enrolled under the Part B benefit or a person acting on his or her behalf, exceptions to the financial limitations for medically necessary services that meet certain qualifications and that are furnished during calendar year 2006.	

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3-Hour Medicare Program Training Module			
Page Number	Section Title and/or Number	Description of Change	
67	Chapter 4	Add the following as the last sentence of the last bullet:	
		The beneficiary may receive another 8 counseling sessions during a second or subsequent year after 11 full months have passed since the first covered cessation counseling session was furnished.	
73 and 74	Chapter 5	Delete pages.	
118	Chapter 7	Insert the following as the third paragraph:	
		Effective August 14, 2006 an appeals process has been established for providers and suppliers whose Medicare enrollment application has been denied or whose billing privileges have been revoked.	

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1.5-Hour Introduction to Medicare Training Module

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14		Delete the second sentence of the last paragraph and add the following:	
		Effective January 1, 2006 a financial limitation was placed on physical therapy, occupational therapy, and speech-language pathology services received by Medicare beneficiaries in all settings except the outpatient hospital and the hospital emergency room. CMS may grant, at the request of the individual enrolled under the Part B benefit or a person acting on his or her behalf, exceptions to the financial limitations for medically necessary services that meet certain qualifications and that are furnished during calendar year 2006.	
44 and 45		Delete pages.	
81		Insert the following as the third paragraph:	
		Effective August 14, 2006 an appeals process has been established for providers and suppliers whose Medicare enrollment application has been denied or whose billing privileges have been revoked.	